should be no politics. Nursing homes do not provide care for red or blue residents. They do not employ red or blue frontline workers. This cause should be bipartisan.

Unfortunately, the Republican proposal fails to provide virtually any resources—certainly nothing like the \$20 billion that we are asking. So I hope we will move forward, as reasonable, caring minds and hearts must do, and make sure we provide the resources necessary to do justice to these heroes.

I yield the floor.

The PRESIDING OFFICER. The Senator from Illinois.

$\begin{array}{c} {\rm AMERICANS} \ {\rm WITH} \ {\rm DISABILITIES} \\ {\rm ACT} \end{array}$

Ms. DUCKWORTH. Mr. President, I am speaking tonight on behalf of the millions of Americans living with disabilities, and on behalf of the many more who, whether they know it or not, are just 1 day, one accident, one devastating medical diagnosis away from acquiring a disability as well.

I come to the floor on their behalf because I came to the floor by rolling through the Capitol's corridors in the wheelchair you see me sitting on now, and I could come to the floor because 30 years ago, Congress passed the Americans with Disabilities Act, granting millions of Americans like me better access to the full, independent lives we deserve.

That landmark legislation only passed because of the dedicated activists who proudly crowded in front of this building in 1990 to demand that their country finally give those with disabilities the basic rights the Constitution provided.

It only became law because dozens of them got out of their wheelchairs, set down their crutches, and crawled up the 83 steps of the Capitol Building—because Jennifer Keelan, an 8-year-old with cerebral palsy, pulled herself to the top of the steps, saying, "I'll take all night if I have to," and because those around her refused to leave a fellow American behind, offering Jennifer support when she needed it, one step, one shoulder to lean on at a time.

Thirty years ago, these activists changed Senators' hearts, minds, and, most importantly, votes. Thirty years ago, this legislative body said that people like me mattered. But last week, Republicans in this Chamber proposed a bill that said we don't.

I speak out of a sense of frustration as I watch my Republican colleagues, including the ones who once championed the ADA, attempt to reconstruct, brick by brick, the shameful wall of exclusion that Congress sought to tear down three decades ago.

Less than a week after celebrating the 30th anniversary of a Republican President declaring that the ADA would bring us "closer to that day when no Americans will ever again be deprived of their basic guarantee of life, liberty, and the pursuit of happiness," Senate Republicans have put forward legislation that threatens to deprive our community of those same fundamental rights.

Many interpreted the timing of the HEALS Act as confirmation of an alarming fact: The GOP has declared war on the disability community and the ADA. I truly hope this is not the case and that the timing was a deeply unfortunate coincidence, but at the end of the day, actions speak far louder than words.

If Senate Republicans want to demonstrate that they value life, that they value the civil rights of all Americans, they must join Democrats in supporting two measures that would show the disability community that their party actually gives a darn about them.

First, we need to save lives by preventing mass institutionalization. Placing individuals with disabilities into congregate care facilities where the risks of serious illness or death are high is reckless and unacceptable. To achieve this goal, we must increase the Federal Medicaid Assistance Percentages, the FMAP, by 10 percent for Medicaid Home and Community-Based Services.

Republicans and Democratic Governors alike desperately need this change. The House already passed this 10 percent FMAP increase months ago, and the Senate must follow suit in any COVID-19 relief deal that is reached.

Real-world experience has tragically demonstrated how vulnerable congregate care settings are to deadly superspreader events like COVID-19. We know from existing data that Americans with intellectual and developmental disabilities are killed at far higher rates than other Americans when infected with COVID-19. So investing in State efforts to provide Medicaid services to vulnerable populations in the safety of their own homes is just a commonsense policy that would save countless lives.

Second, Senate Republicans must abandon efforts to gut the ADA, once and for all. Disability rights are human rights, and these civil rights must never become optional benefits that can be taken away whenever it is convenient or cheaper for employers or those who are in power. Allowing businesses to exclude employees with disabilities from reopening plans is exactly the type of discrimination that the ADA sought to abolish. Yet the GOP HEALS Act seeks to relegate millions of Americans back to secondclass status, sending the offensive message that our community can be cast aside if the cost to companies are too high.

But the harsh reality is that these efforts are anything but new. Decades ago, when my friend Judy Heumann passed her exams to earn a teaching license, she was nevertheless denied the license by the school board all because of so-called concerns about legal liability in the workplace.

They said that because Judy used a wheelchair, she represented a fire hazard and could not safely teach in a classroom. Do these types of concerns sound familiar? The passage of the ADA was supposed to relegate such workplace discrimination stories to the history books. Those outrageous examples of injustice were supposed to represent the nightmares of yesterday, not the reality of tomorrow made possible by a Republican proposal today.

Yet here we are in 2020, and Senate Republicans are shamelessly using a deadly pandemic as cover to gut the ADA and hoist that brick wall of exclusion right back up. No one is asking for special treatment. What we are asking for is to not take away the basic rights the Constitution promised all those centuries ago and this Chamber affirmed three decades ago under a Republican President.

So as we debate this next relief package, the questions that every Member of this body must ask are simple: Are we going to leave Americans with disabilities behind? Are their lives worth saving? Are their jobs expendable?

For anyone with a conscience—for anyone with any ounce of compassion or even just a lick of respect for the rule of law, the answer to those questions should be obvious.

You know, in the Army our Soldier's Creed included never leaving a fallen comrade behind. I am alive today because my buddies in Iraq risked their lives to recover my body because they thought I was dead and refused to leave me behind.

The activists who crawled their way up the Capitol steps did much the same for each other: helping one another make their way up inch by inch, closer to the Chamber I am sitting in right now, refusing to let any one of them struggle—to let any one of them fall behind.

I am on the floor tonight because of those two acts of courage from two different groups of people continents away and a decade and a half apart.

Now, as a Senator, my North Star is paying that debt of honor forward and trying to live up to the sacrifices they made for others. So today and tomorrow and the tomorrow after that, you better believe I am going to keep fighting to hold the Senate accountable for living up to the motto of the Nation we serve: "E Pluribus Unum," Out of Many, One, because this country was born on that idea. It was born from the phrase "We the People." And it grew out of the belief that there is nothing more powerful than the will of the citizenry when the citizenry works with each other and for each other.

Our response to this pandemic is a test of our faith in that Founding doctrine. If we focus on the "we"—if we think about uniting the many into the one—then we can save lives and move past this national trauma together. But it is up to each one of us to act in a way that protects all of us, to act in a way that ensures no one, nobody, disabled or otherwise, will be left behind.

With that, I yield the floor. The PRESIDING OFFICER. The Senator from Kansas.

COMMANDER JOHN SCOTT HANNON VETERANS MENTAL HEALTH CARE IMPROVEMENT ACT OF 2019

Mr. MORAN. Mr. President, I am pleased to be on the floor this evening, but I am here to discuss a significantly tragic issue that affects way too many Americans all across our country—certainly at home in Kansas—and that is the lack of treatment for mental health conditions and, in many instances, the consequence that comes from that—suicide.

Sadly, veterans in particular face risks for suicide, and, unfortunately, COVID-19 has increased the problem. Veterans have a higher rate of suicide and mental health issues than people who have not served in our armed services.

We know there is not a single explanation or reason for suicide, and there is no single treatment for prevention strategy. One veteran lost to suicide is one too many, and, of course, we all have the obligation to help those who have served our Nation—those who fought bravely for our country—to help fix this tragedy.

Every day that we fail to act is another day we lose another 20 veterans to suicide. They need our help.

I want to highlight one veteran who fought a battle with his mental health condition, CDR John Scott Hannon. Commander Hannon was a decorated Navy SEAL. I met his family through Senator from Montana, Mr. TESTER. He. like every other veteran. was more than just what his service record would show. His family and friends remember him as a passionate mental health advocate for veterans. He tried to help other veterans who faced the same challenges that he did. They say he had a gentle heart and a fierce belief in taking actions to tackle big challenges.

Sadly, Commander Hannon lost his fight with post-traumatic stress, bipolar disorder, and the effects of a traumatic brain injury. He lost that fight in February 2018. He now lives on in the memories of his friends and family, and when S. 785 becomes law—the namesake of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act—he will be remembered even more—more by other Americans than his family and friends.

I am proud to lead this effort in passage of this legislation, in its development, its creation, in the studies and efforts, the conversations that went on with my colleagues in the Senate, our colleagues in the Veterans' Affairs Committee, the veterans service organizations, and his family. I am proud to lead that effort with the Senator from Montana, the Senator who represents Commander Hannon's family.

For several months now, our committee has been working closely with

the Department of Veterans Affairs and the White House to improve upon and advance S. 785. This bill will make necessary investments in suicide prevention. It will improve and support innovative research. It will make improvements and increase the availability of mental health care.

This bill establishes a grant program championed by Mr. Boozman, the Senator from Arkansas. The VA will be required to better collaborate with community organizations across the country, serving veterans.

Senator Tester, Senator Boozman, and I come from rural States, and it is hard to find the services where they are necessary. If we can allow the Department of Veterans Affairs to deal with local organizations, we have a better chance of fighting suicide.

This legislation represents a team effort. I appreciate Secretary Wilkie, David Ballenger, Cathy Haverstock, and Chris Anderson for their help and commitment in addressing mental health services.

President Trump and his support for veterans is well recognized. The Second Lady, Karen Pence, has also been a long-time advocate for veterans' mental health, and I appreciate our conversations on this important topic. The staff at the White House and at the Domestic Policy Council—Joe Grogan, Brooke Rollins, James Baehr, and Virginia McMillin—deserve recognition as well.

The Senate VA committee is known for its spirit of bipartisanship, and I want to thank my colleagues on both sides of the aisle for their input on this important legislation. Along with the lead sponsor of this legislation, Senator Tester, and the efforts I mentioned of Senator BOOZMAN, I would recognize Senator Sullivan, Senator TILLIS, Senator CASSIDY, Senator ROUNDS, Senator CRAMER—the Presiding Officer this evening—Senator LOEFFLER, Senator BLACKBURN, Senator McSally, and Senator Kaine for their substantive contributions to several primary sections of this bill.

These contributions by our colleagues range from studies on overmedication and suicidality, the effectiveness of hyperbaric oxygen therapy on PTSD and TBI, a pilot program for post-traumatic growth, and many provisions that will provide more direct oversight of the VA to ensure the Department is equipped to better serve veterans.

As a result, this bipartisan legislation has 51 cosponsors, and it received a unanimous 17-to-0 vote in the Senate Committee on Veterans' Affairs earlier this year, and today is the time we will pass this measure out of the Senate.

I am calling on my colleagues on both sides of the aisle to do our part to make certain that every veteran has access to the lifesaving care and support they need. We need to ensure that every VA medical center is equipped with the proper personnel, evidencebased treatment options, and the best research-informed care to fit the needs of each veteran who walks through its doors.

For veterans and servicemembers like CDR John Scott Hannon, we, in Congress, have the opportunity to take action to help them know they don't have to struggle alone. Our legislation will help connect these veterans and servicemembers to more resources and provide them with the tools they need to address the challenges related to their service.

To my colleagues, we have a significant role and responsibility to combat this struggle, and here today we can do our part to make certain that, in their struggles, our veterans are equipped with the care and services they need to be successful, to win. We must take real and urgent action to tackle the challenges together.

ADDITIONAL COSPONSOR TO S. 785

Mr. President, I ask unanimous consent that the Senator from Rhode Island, Mr. REED, be added as a cosponsor to S. 785.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. MORAN. Mr. President, I also ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 498, S. 785.

The PRESIDING OFFICER. The clerk will report the bill by title.

The legislative clerk read as follows: A bill (S. 785) to improve mental health care provided by the Department of Veterans Affairs, and for other purposes.

The PRESIDING OFFICER. Is there objection to proceeding to the measure?

There being no objection, the Senate proceeded to consider the bill, which had been reported from the Committee on Veterans' Affairs with an amendment to strike all after the enacting clause and insert in lieu thereof the following:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019".

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

 $\begin{array}{llll} TITLE & I{--}IMPROVEMENT & OF & TRANSITION \\ OF & INDIVIDUALS & TO & SERVICES & FROM \\ DEPARTMENT & OF & VETERANS & AFFAIRS \end{array}$

Sec. 101. Expansion of health care coverage for veterans.

Sec. 102. Review of records of former members of the Armed Forces who die by suicide within one year of separation from the Armed Forces.

Sec. 103. Report on REACH VET program of Department of Veterans Affairs.

Sec. 104. Report on care for former members of the Armed Forces with other than honorable discharge.

TITLE II—SUICIDE PREVENTION

Sec. 201. Financial assistance to certain entities to provide and coordinate the provision of suicide prevention services for eligible individuals and their families.

Sec. 202. Study on feasibility and advisability of the Department of Veterans Affairs providing certain complementary and integrative health services.